



After School Enrichment Program

2018-2019 Registration Form

Please complete one form per child.

Child's Name: _____ D.O.B. ____/____/____

Allergies/Medications: _____ Grade as of Aug. 2018: _____

Address: _____ City: _____ State: _____ Zip: _____

Sex: M F JEA Member? Y N School: _____

With whom does the child reside?: Mother Father Both Other (specify) _____

Mother/Guardian Name: _____

Email* (Required): _____

Check if address is the same as child's address:

Address: _____ City: _____ State: _____ Zip: _____

Work Phone: _____ Cell Phone: _____ Home Phone _____

Father/Guardian Name: _____

Email* (Required): _____

Check if address is the same as child's address:

Address: _____ City: _____ State: _____ Zip: _____

Work Phone: _____ Cell Phone: _____ Home Phone _____

Marital status of parents: Married Separated Divorced Widowed Other _____

Emergency Contact Information: (must be local)

In the event of an emergency, we will attempt to contact a parent. Please provide an additional person who is authorized to make decisions regarding your child if we are unable to reach a parent.

Name: _____ Relationship to Child: _____

Phone: _____ Cell: _____

Jewish Educational Alliance

5111 Abercorn Street • Savannah, GA • 31405
912-355-8111

Return completed forms to the Jewish Educational Alliance or via email to kids@savj.org.



After School Enrichment Program

2018-2019 Pick-Up Authorization Form

Pick-Up Authorization Form

I, _____, give the JEA Children's Department and the Savannah Jewish Educational Alliance permission to release my child, _____, from the After School program to the persons listed below.

Be sure to list all authorized adults – including yourself.

- | | |
|-----------|--------------|
| 1. _____ | Phone: _____ |
| 2. _____ | Phone: _____ |
| 3. _____ | Phone: _____ |
| 4. _____ | Phone: _____ |
| 5. _____ | Phone: _____ |
| 6. _____ | Phone: _____ |
| 7. _____ | Phone: _____ |
| 8. _____ | Phone: _____ |
| 9. _____ | Phone: _____ |
| 10. _____ | Phone: _____ |

Please sign below to signify your understanding of the pick-up policy.

I authorize the adults listed above to pick up my child from the JEA After School program as necessary. I have informed them that they are listed here and may be contacted by the JEA.

I understand that my child will only be released to the persons listed on this form. All individuals who pick up my child must provide photo ID each time my child is removed. By signing below, I understand and agree to abide by all conditions outlined.

Parent/Guardian Name (Print): _____

Parent/Guardian Name (Signature): _____ Date: _____



After School Enrichment Program

2018-2019 Policies and Procedures

Schools

The JEA provides transportation from a variety of schools to the JEA daily for the After School program. For the 2018-2019 school year, the JEA will be providing transportation services from Charles Ellis Montessori Academy, Esther F. Garrison School for the Arts, Jacob G. Smith Elementary, Savannah Classical Academy, Susie King Taylor Community School, and Virginia L. Heard Elementary.

2018-2019 After School Program Rates

| After School | 1st Child Daily | 1st Child Weekly | 2nd Child Daily | 2nd Child Weekly |
|--------------|-----------------|------------------|-----------------|------------------|
| Member | \$18.00 | \$75.00 | \$16.00 | \$70.00 |
| Non Member | \$25.00 | \$110.00 | \$23.00 | \$105.00 |

Financial Policy

A credit card authorization form is REQUIRED for all students registered in the After School program. This form is used for program registration fees and refunds. This form is stored on file for one year and can also be used for other Children's Department programs such as Days at the J or Saturday Night Out. There is a \$5.00 late fee assessed to all registrations received for Days at the J and Saturday Night Out on the date of the program.

Flex Spending Receipts or Childcare Tax Receipts

If you need a statement or receipt for reimbursement, please email finance@savj.org. Include the date range of service that is needed. Services must be rendered before receipt is given. We will email the receipt to you within 7 days of the request.

Cancellation/Refund Policy

Multi-Child Discount

In order to qualify for the multi-child discount, all children MUST be registered for the same dates in the After School program. If only one child is registered, that child will be charged the full rate. The multi-child discount is \$2.00 off per additional child per day or \$5.00 off per additional child per week.

Cancellations and Changes to Registration

Cancellations made three days prior to your child attending the registered day of After School or Days at the J will receive a full refund to the card on file. Cancellations must be requested in writing by email to kids@savj.org. Cancellations made after the deadline, forfeit any refund or credit. Registered families may switch days within the same month, providing there is space available. Changes must be requested by email to kids@savj.org.

Absences Due to Illness

Credits will be given for absences due to illness with a provided doctor's note. Doctor's notes must be turned in to the Children's Department within one week of the date of absence to receive a partial refund to the card on file.

By signing this authorization, I acknowledge that I have read and agree to the JEA After School policies and procedures listed above.

Parent/Guardian Name (Print): _____

Parent/Guardian Name (Signature): _____ Date: _____



JEA Children's Department

2018-2019 Late Pick Up Policy

It is part of our professional responsibility to care for your child during JEA Children's Department activities and events. Throughout the duration of your child's activity, including pick up, we will never leave your child unsupervised. As a partner in the development of your child, we ask that you do all that is within your power to pick your child up in a timely manner so that we may continue with our personal and professional duties. The JEA Children's Department programming hours of operation are as follows:

After School: Monday - Friday 3:00pm - 6:00pm

Days at the J: Monday - Friday* 8:00am - 6:00pm

**Dates are scheduled in advance and require pre-registration.*

Saturday Night Out: Saturday** 6:30pm - 10:00pm

***Dates are scheduled in advance November—March. Times are subject to change.*

If your child is not picked up by the program designated end time, a late fee will be assessed and charged to the card on file on the following business day. You will be given a form to notify you of the charge amount prior to the card being charged. If the clock at the JEA reads 6:01pm, you are late and a late fee will be assessed. **The fee is \$1.00 per minute per child.**

To keep your child from worrying about you, please notify the JEA Children's Department staff that you are running late. Staff can be reached at 912-355-8111. If program staff have not heard from you by the end of the program and cannot reach you by phone, the emergency contacts you provided will be called. One of those contacts will be asked to pick up your child. If you call to inform the JEA program staff that you will be late, you will still incur a late fee.

While we do understand things come up and traffic can be challenging, even in the best of times, we worry about your safety just as much as your child does. Your best efforts to make sure these occasions are the exception are greatly appreciated.

By signing this authorization, I acknowledge that I have read and agree to the JEA Children's Department Late Pick Up policy.

Parent/Guardian Name (Print): _____

Parent/Guardian Name (Signature): _____ Date: _____



JEA Credit Card Authorization Form

Please check off all departments that will use this credit card.

Membership Children's Dept . Camp Preschool

Member #

Cardholder Name

Credit Card #

Expiration Date

CVV #

**Billing
Zip code**

Member Name

if different from cardholder name

Children's Names on Account

Child One

Child Two

Child Three

Child Four

CREDIT/DEBIT CARD AUTHORIZATION

By signing below, I authorize my credit/debit card institution to charge my credit/debit card for funds drawn by the Jewish Educational Alliance (JEA) on my account for JEA membership, Preschool Savannah tuition, Children's department, Camp and other associated fees. Such transfer shall be my receipt for the payment. It is further understood that if such payment is not honored by the credit/debit card institution, then the JEA, at its discretion, will resubmit the amount due for payment on a future date. I also understand that if corrections to the amount are necessary, it may involve an automatic adjustment (credit or debit) to my account.

(Preschool tuition only) Should any preauthorized credit/debit card charge not be honored by 5pm on the day of charge, then I understand that my credit/debit card will be charged in the amount of the original payment plus a \$25 service charge per child and an additional \$5 charge per day until payment is received.

This card will stay on file until we receive written notice to change or cancel use.

Cardholder Signature _____

Date _____